



Community Development Department
39550 Liberty Street, P.O. Box 5006, Fremont, CA 94537-5006
510 494-4460 *ph* | 510 494-4820 *fax* | www.fremont.gov

Building Permit # _____
Alt. Mat. # _____
Date Logged: _____
Plan Check # _____

Alternate Materials and Methods of Construction Request

Under the provisions of Section _____ of the _____ California Building Code, the undersigned request approval of alternate materials and methods of construction for:

Project Name: _____

Project Address: _____

Subject of Alternative: _____

Code Requirement (specify code edition and section): _____

Alternate Proposed: _____

Justification (attach copies of any references, test reports, expert opinions, etc.): _____

Requested by (print and sign):

Architect or Engineer (Designer of Record) Date

Contractor Date

Building Owner (Applicant) Date

Contact Phone No.

(Staff Use Only)

Staff Comments: _____

☐ Recommended ☐ Not Recommended

Staff (Signature) Date

Staff (Signature) Date

Comments: _____

☐ Approved ☐ Denied

☐ Approved ☐ Denied

Building Official Date

Fire Marshal (if applicable) Date